

# Foster Family Home - Criteria Report

Provider ID: 1-140072

Home Name: Maria Charlotte Quitevis, CNA

Review ID:

94-524 Loaa St.

Reviewer: Carrie Wakai

Waipahu, HI

96797

Begin Date: 11/30/2017

End Date: 11/30/2017

## Foster Family Home Required Certificate [17-1454-6]

6.(b) Any person, agency, or organization that wants to operate a home as a community care foster family home to provide, for a fee, twenty-four-hour living accommodations, including personal care and homemaker services for adults who have nursing facility level of care needs and are not related to the person providing the care, shall obtain a certificate of approval from the department.

6.(d) To be certified as a community care foster family home, a person, agency, or organization shall:

6.(d)(1) Comply with all applicable requirements in this chapter; and

6.(d)(2) Not have had a previous license or certificate to provide social or health care services that was revoked within twelve months of the current application for a certificate of approval, except that this restriction shall not apply if the revocation was successfully appealed.

Comment: 6.(d)(1)-Home visit made for a 2 person CCFFH requesting to increase to a 3 person CCFFH. Home met all compliance requirements at the time of the home visit. No corrective action required. Home will receive a 1 year 3 bed certification.

Carrie Wakai  
Compliance Manager

11-30-2017  
Date

Maria Charlotte Quitevis  
Primary Care Giver

11-30-2017  
Date